

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION | S. Z | | 07-10-01 |
| O.I.P.E. CLASSIFIER | RSD | | 2/18/01 |
| FORMALITY REVIEW | R. A | J. S. RY | 08/28/01 |
| RESPONSE FORMALITY REVIEW | ET | JC878 | 11/15/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
| 4 | ✓ | ✓ | |
| 5 | ✓ | ✓ | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
| 10 | ✓ | ✓ | |
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| 14 | ✓ | ✓ | |
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| 47 | ✓ | ✓ | |
| 48 | ✓ | ✓ | |
| 49 | ✓ | ✓ | |
| 50 | ✓ | ✓ | |

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

614
 11-15-01